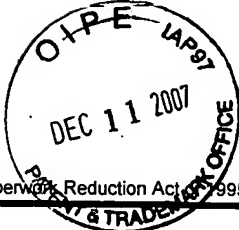


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PTO/SB/82 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035

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NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/536,497
Filing Date	December 12, 2003
First Named Inventor	Maria Grazia CANALINI
Art Unit	1616
Examiner Name	Konata M. George
Attorney Docket Number	A-10485

**I hereby revoke all previous powers of attorney given in the above-identified application:**

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint the practitioners associated with the Customer Number: **20741**

☒ Please change the correspondence address for the above-identified application to:

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

*Maria Grazia Canalini*

Name

Maria Grazia Canalini

Date

Telephone

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

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